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J. E.

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308 Race St.

An  
Inaugural Dissertation  
on  
Amenerrhoea.

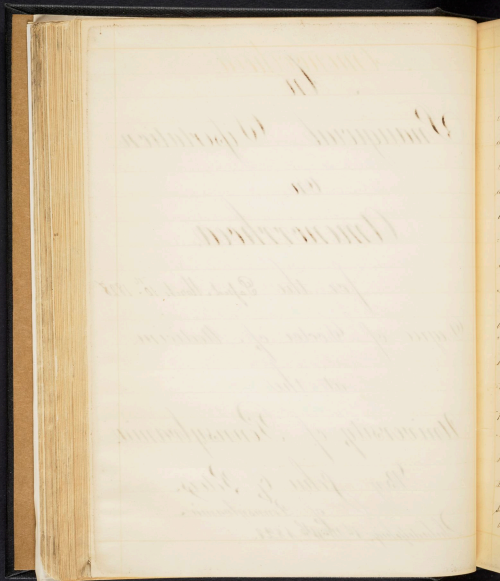
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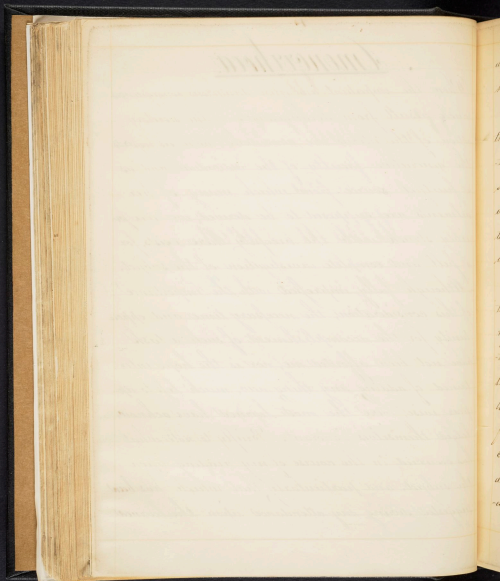
By John G. Peters,  
of Pennsylvania.

Philadelphia, 1<sup>st</sup> May 1828.



## Amenerrhoea

When the important and often dangerous consequences which result from derangements of the secretory action of the uterus are considered, both as regards the generative faculty of the individual and as a fruitful source from which many of her ailments are supposed to be derived, we are forcibly struck with the necessity there exists, for a full and complete investigation of the subject. Although fully impressed with the importance of this consideration, the necessary time and opportunity for the accomplishment of such a task have not been afforded me, nor is the hope entertained of adding any thing new, much less to appear wise, were the most learned have acknowledged themselves ignorant. Briefly to note what has occurred in the course of my reading upon the subject, and particularly that which has been suggested during my attendance upon the learned

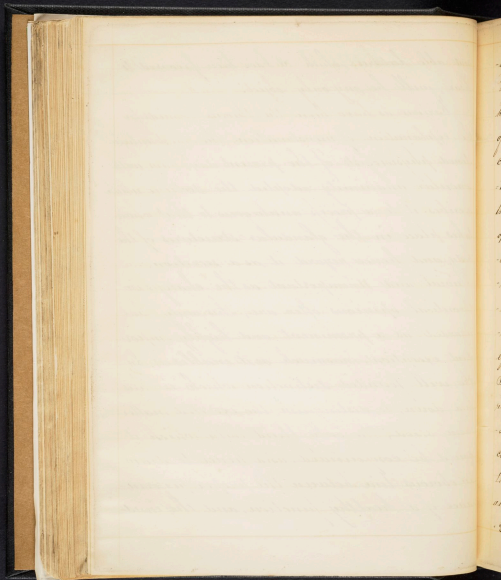




and able lectures which I have been favoured to hear, will be my only object.

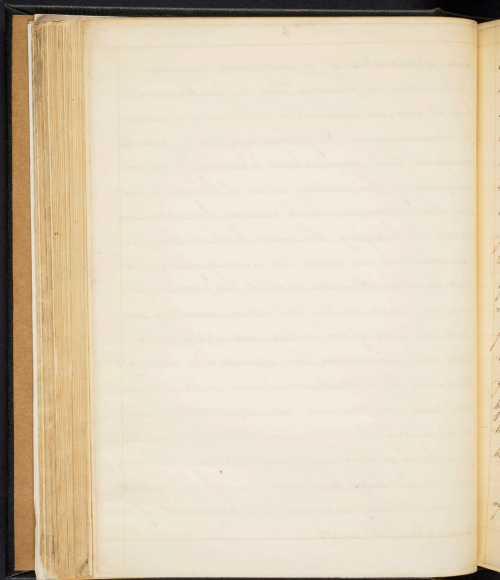
Various as have been the theories formed for the explanation of menstruation, the most enlightened physiologists of the present day, have with singular unanimity adopted the doctrine which ascribes it to a process analogous to that which takes place in the glandular structures of the body, and hence regard it as a secretion.

Trivial and unimportant as the changes in theoretical opinions often are, this may be regarded as a prominent and highly important exception, inasmuch as it enables us by the well founded distinction which is thus laid down, to distinguish the excreted matter from blood, the only fluid with which it could be confounded, and hence to draw an obvious line between the proper performance of a healthy function, and the insid-



-ious approaches of a dangerous malady.

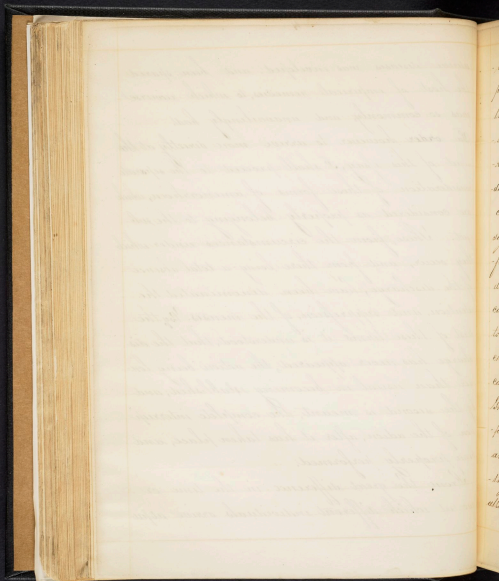
By admitting the preceding <sup>theory</sup>, says Professor Whipple, we have, at once, an explanation of the *modus operandi* of emmenagogues. It follows, necessarily, from the conception, that amenorrhoea is caused by an interruption of the secretory action of the uterus, and that the remedies which remove the suppression, operate by bringing the organ back to that precise condition, in which the exercise of the function depends. In order to effect this purpose, however, we must, in the first place, accurately ascertain the state of the system, and apply, with equal discrimination, the appropriate remedies. It is only by a strict compliance with the above rule, that we can ever hope to pursue a rational or successful practice; and probably had this course been earlier and more generally followed, there would have been saved much of the doubt and uncertainty, in which the treatment of



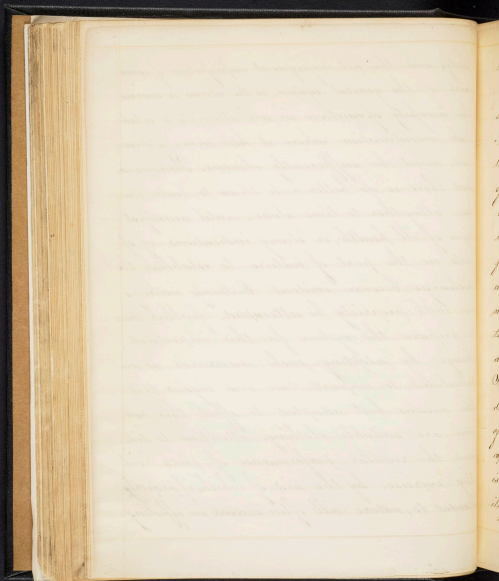
uterine diseases was enveloped, and been spared the host of empirical remedies, to which recourse was so commonly and unavailingly had.

In order however to arrive more directly at the object of this essay, I shall proceed to the separate consideration of those forms of amenorrhoea, which are considered as properly belonging to the subject. These, from the circumstances under which they occur, and from there being a total absence of the discharge, have been denominated the retention, and suppression, of the menses. By the first of these terms it is understood, that the discharge has never appeared, the action being longer than usual in becoming established; and by the second is meant, the complete interruption of the action, after it has taken place, and been properly performed.

From the great difference in the time or age at which different individuals arrive at pu-



berly, and the not unrequent imperfection of some part of the genital system, as the uterus or ovaries, the necessity of caution in all attempts to establish menstruation where it has never appeared, must be sufficiently obvious. Perhaps indeed there is no better rule than to leave the case altogether to time alone, until manifest signs of ill health, or strong indications of efforts, on the part of nature to establish the discharge, become evident. Certainly nothing can with propriety be attempted, further than to prepare the system for this important change, by adopting such measures as are calculated to impart tone and vigour to it. The means best adapted to effect this purpose are suitable clothing, attention to diet, and the regular performance of some healthy exercise, by the aid of which, if properly attended to, nature will often succeed in effecting



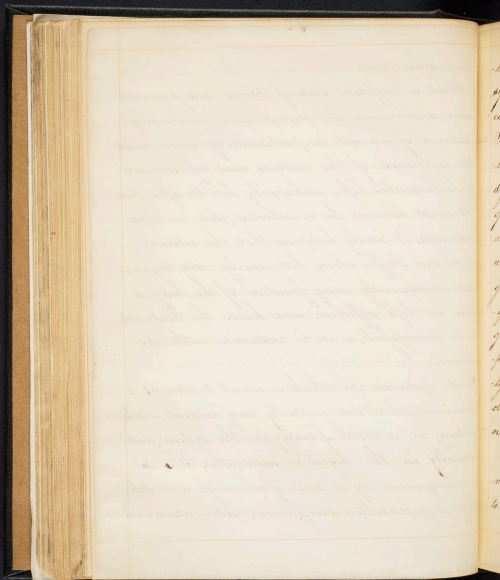


the desired object.

That a different state of things does frequently occur, demanding the prompt and judicious assistance of our art, is, particularly when under the influence of the customs and refinements of fashionable life, unhappily but too often true.

It must however be recollected, that in these instances, it rarely happens that the uterine functions suffer alone, but nearly every organ, and consequently every function of the body, is more or less affected, and hence the treatment to be successful, must be coextensive with the disease.

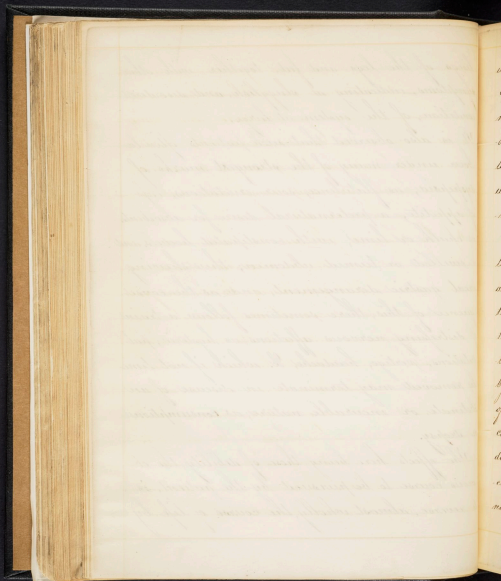
In the instances in which medical treatment is demanded, there are generally very evident marks of atony, or a want of energy in the system, and especially in the digestive apparatus. This state is accompanied by a sense of weariness, and debility, a pale sallow complexion, oedematous swell-



limbs of the legs and feet, together with other symptoms, indicating a sluggish, and disordered condition, of the system at large.

It is also observed that such patients often labour under many of the strongest marks of dyspepsia, as flatulence, sour eructations, loss of appetite, a preternatural desire for absorbents as chalk or lime, with constipated bowels, and a swelled or turned abdomen; thus shewing great gastric derangement, and as the consequence of this, there sometimes follows a train of distressing nervous affections, as hysteria, palpitations, vertigo, headache, &c. which if not timely removed may terminate in disease of an obstinate, or incurable nature, as consumption or dropsy.

The effects here being those of debility, the obvious course to be pursued by the patient, is to reverse, almost wholly, the course of life by +



which she has been plunged into this formidable condition—To exchange the foul and murky atmosphere of the town, for the pure and invigorating breezes of the country,—and with the city, leave all its fashionable follies, to be content, with the plain fare and comfortable habiliments, of a country life.

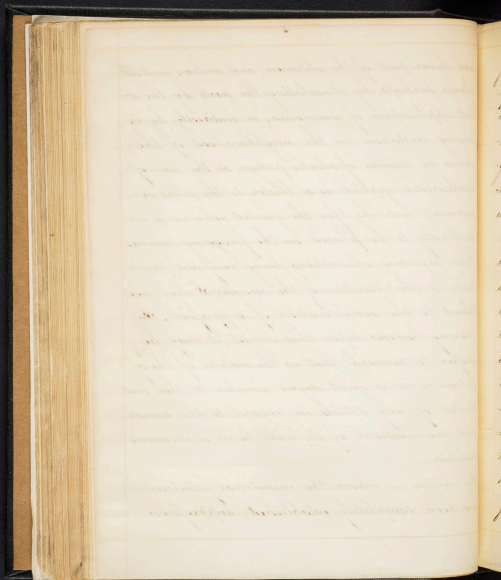
If this plan be followed by the patient, but little will remain for the physician; his services at best can be but auxiliary. To remove from the stomach and bowels the foul productions of their own depraved actions, by the evacuants adapted to each, and to prevent their reaccumulation by infusing new tone and energy into the operations of these parts by means of proper tonics, seem to constitute the leading resources of the art. No doubt occasionally advantage is obtained, from soliciting the discharge, especially at the time when nature is cooperating, by fomentations of the feet



and lower part of the abdomen and vulva; and still  
 often, perhaps, by stimulating the parts by the di-  
 rect application of ammonia, or indirectly, by in-  
 ducing irritation in the neighbourhood of the  
 uterus by means of aloetic purges, or the use of  
 cantharids, applied as a blister to the pubis or  
 sacrum, but by far the greatest reliance is un-  
 doubtedly to be placed on the foregoing means.

The preceding observations being confined princi-  
 pally to the retention of the menses, I shall next  
 proceed to the consideration of suppression. In  
 entering however upon this subject, it may be  
 proper to remark, that as the nature of the af-  
 fection, is, in a great degree, similar to that just  
 treated of, any details in regard to the causes  
 and management of it, will be in a measure  
 avoided.

In women in whom the menstrual function  
 has been completely established, suppression

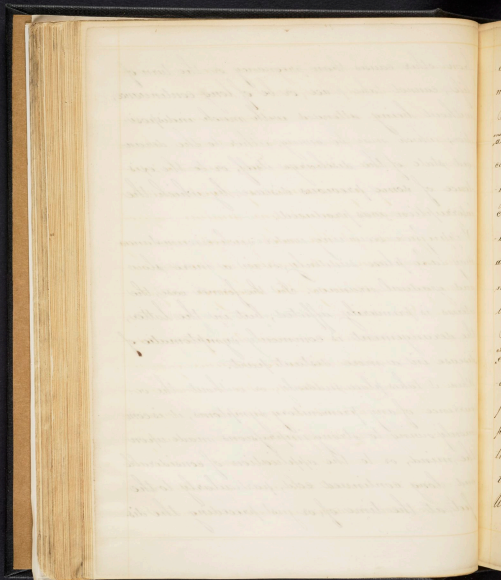




from other causes than pregnancy or the turn of life, cannot take place, or be of long continuance, without being attended with much indisposition; which may be owing, either to the deranged state of the discharge itself, or to the existence of some previous disease, by which the interruption was produced.

Suppression occurring under such circumstances may take place suddenly, or in a more slow and gradual manner. In the former case, the uterus is primarily affected; but in the latter, the derangement is commonly symptomatic of disease in a more distant part.

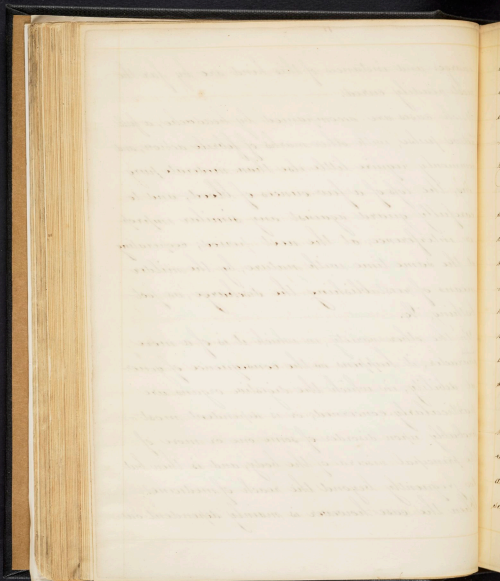
When it takes place suddenly, or without the occurrence of any premonitory symptoms, it is commonly owing to strong impressions made upon the mind, or to the application of considerable and long continued cold, particularly to the feet, at the time of, or just preceding the dis-



charges and instances of this kind are by far the most readily cured.

Such cases are accompanied by headache, a full <sup>and</sup> active pulse, with other marks of febrile action, and commonly require little else than moderate purging, the loss of a few ounces of blood, and to carefully guard against any similar improvement or interference, at the next period; cooperating at the same time with nature, by the milder means of reestablishing the discharge, as foot-bathing, &c.

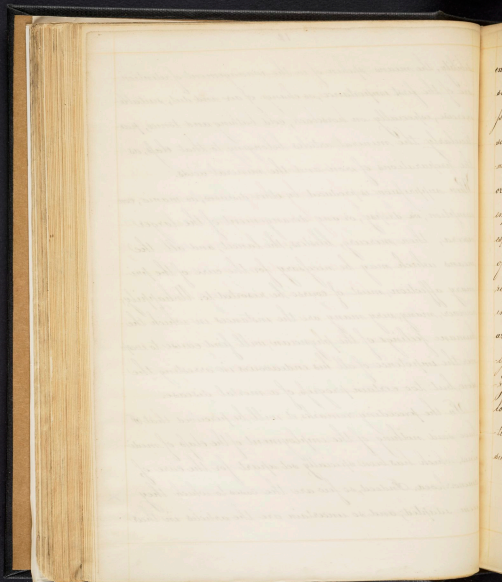
In the other variety, in which it is of a more <sup>chronic</sup> character, it happens as the consequence of general debility, in which the digestive organs are particularly concerned; or is dependent most probably upon disorder of some one or more of the principal viscera of the body, and is then but too frequently beyond the reach of medicines. When the case however is mainly dependent on



debility, the means spoken of in the management of retention are of the first importance, as change of air and diet, suitable exercise, especially on horseback, cold bathing and tonics, particularly the mineral articles belonging to that class, as the preparations of iron and the mineral acids.

When suppression is produced by other diseases, as mania, consumption, or dropsy, or any derangement of the larger viscera, then mercury, blisters, the lancet, and all the means which may be necessary for the cure of the primary affection, must of course be resorted to. Unhappily, however, many, very many are the instances in which the humane feelings of the physician, will find cause to weep over the impotence of all his endeavours, in arresting the slow, but too certain progress, of a mortal disease.

On the preceding remarks, it will be perceived that I have said nothing of the employment of the class of medicines, which has been specially set apart for the cure of amenorrhoea. Indeed, so few are the cases to which they seem adapted, and so uncertain are the articles in their



emmenagogue properties, that I scarcely know what can be said profitably upon the subject. Both retention and suppression of the menses being very commonly only symptomatic of some deep rooted affection, and not unfrequently accompanied with much fever, the stimulating properties of most or all of the articles of this class, seem to preclude their employment. Where there is more atony of the system, and especially of the uterus, a gentle stimulation by means of any of those articles, as hinted at when treating of retention, may often be highly serviceable; the instances in which they can be safely and successfully employed, are, however, there is much reason to believe, exceedingly few. In fact great caution is undoubtedly necessary, if there be much general excitement, or even local congestion, as of the liver, lungs &c. - and particularly where there may be the least ground for suspecting pregnancy. D

